PATENT	<b>APPI</b>	ICATION	CEDIAL	NO	
raicht.	ALLI	ACATION .	SEKIAL	NO.	

## U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

07/31/2003 AADOF01 00000060 011425 10629227

01 FC:1001 02 FC:1201 750.00 DA 84.00 DA

Adjustment date: 11/14/2003 AGDITOM 07/31/2003 AADDF01 00000060 011425 10629227 02 FC:1201 84.00 CR

PTO-1556 (5/87)

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

**CLAIMS AS FILED - PART I** 

Application or Docket Number 1062922)

(Column 1) (Column 2)						SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS		20				FEE	) 	RATE	FEE			
FOR		NUMBER F	FILED NUME	BER EXTRA	BASIC FEE	375.00	OR	BASIC FEE	750.00			
TOTAL CHARGEABLE CLAIMS			) minus 20= *		B	X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			9 minus 3 = *		<b>%</b> -	X42=		OR	X84=	-		
MULTIPLE DEPENDENT CLAIM PRESENT					+140=		OR	+280=				
* If the difference in column 1 is less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	750				
CLAIMS AS AMENDED - PART II								OTHER				
		(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDN	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=			
AME	Independent	*	Minus	*** PENDENT CLAIM	=	X42=		OR	X84=			
<u> </u>	TINOT FILSE	INTATION OF IVI	JETTPEL DEP	ENDENT CLAIV	<u> </u>	+140=		OR	+280=			
						TOTAL		OR	TOTAL			
		(Column 1)		(Column 2)	(Column 3)	ADDIT. FEE		• • •	ADDIT. FEE			
		CLAIMS		HIGHEST	(Column 3)		ADDI-			ADDI-		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL		
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=			
	Independent	*	Minus	*** PENDENT CLAIM	=	X42=		OR	X84=			
L	TINOT FRESE	NIAHON OF IM	JETTPLE DEF	ENDENT CLAIV		+140=		OR	+280=			
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT C	e e e	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=			
AME	Independent	*	Minus	***	=	X42=	-	OR	X84=			
Ļ	FIRST PRESE	NIAHON OF M	ULTIPLE DEF	PENDENT CLAIN	1	.440			.000			
.*	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2 write "0" in o	olumn 3.	+140=		OR	+280=			
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appreciate box in column 1.											